## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mainted to the current correspondence address as midulated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS\* for DADRESS\* for m

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SMITH. GAMBRELL & RUSSELL SUITE 1130 1130 CONNECTICUT AVENUE, N.W. WASHINGTON, DC 20036

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Defe APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 033965.005 9871 10/520 495 01/05/2005 Fulvio Costa

TITLE OF INVENTION:

	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1510	\$300	\$1810	07/30/2010
-	EXAM		ART UNIT	CLASS-SUBCLASS		

 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Smith, Gambrell & Russell, LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE DEGUSSA NOVARA TECHNOLOGY S.P.A. Novara, ITALY

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💟 Corporation or other private group entity 🗀 Government

4b. Payment of Fee(s): 4a. The following fee(s) are enclosed:

Issue Fee A check in the amount of the fee(s) is enclosed.

Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Denosit Account Number 024300 Advance Order - # of Copies \_

5. Change in Entity Status (from status indicated above)

Typed or printed name Thomas G. Wiseman

□ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the full-indiced States Patent and Trademark Order.

Authorized Signature /Thomas G. Wiseman/ Date July 30, 2010

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